

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2012 JAN 30 AM 10:44
FEC MAIL CENTER
Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

CANDACE DUVAL FOR CONGRESS

ADDRESS (number and street)

2206 TRAILSIDE DR

#202

☐ (Check if address
is changed)

AUSTIN

TX

78704

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

ORGANIZEIT4U@GMAIL.COM

☐ (Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

CANDACEDUVAL.COM

☐ (Check if address
is changed)

2. DATE

01st ' 23rd ' 2012^Y

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

KENNETH W FLIPPIN

Signature of Treasurer

Kenneth W. Flippin

Date

01st ' 23rd ' 2012^Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

CANDACE DUVAL

Candidate Party Affiliation

DEM

Office Sought:



House



Senate



President

State

TX

District

21

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

12030720521

Write or Type Committee Name

CANDACE DUVAL FOR CONGRESS

6. Name of Any Collected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

FRIENDS OF CANDACE DUVAL

Mailing Address

6209B ADALEE AVE

AUSTIN

CITY

TX

STATE

78723

ZIP CODE

Relationship: ☐ Connected Organization ☒ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name

CANDACE ELAINE DUVAL

Mailing Address

2206 TRAILSIDE DR

#202

AUSTIN

CITY

TX

STATE

78704

ZIP CODE

Title or Position

PROPRIETOR

Telephone number

512 - 712 - 6615

8. Treasurer: List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

KENNETH WESLEY FLIPPIN

Mailing Address

6209B ADALEE AVE

AUSTIN

CITY

TX

STATE

78723

ZIP CODE

Title or Position

TREASURER

Telephone number

512 - 820 - 2674

12030720522

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

CAPITAL ONE BANK

Mailing Address

7200 N MOPAC BLVD

SUITE 100

AUSTIN

TX

78731

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030720523

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked



PREPARER

(3/2005)

1/30/12

DATE PREPARED

12030720524